

AACC | School of Health Sciences

Check all that apply

- Phlebotomy Technician**
- Medical Laboratory Assistant (MLA)**
- Medical Laboratory Technician (MLT)**

Rolling Admissions Medical Laboratory Sciences Program Application

Submit completed application to healthsciencesadmissions@aacc.edu (preferred) or via mail to Anne Arundel Community College (AACC), ATTN: Health Sciences Admissions, 101 College Parkway, Arnold, MD 21012. Students are admitted on a rolling admission basis. The Phlebotomy cohort begins in Spring (January) and Fall (August) each year. MLT and MLA begin each Fall (August). Students need only apply once provided their application is complete. A future seat will be slotted once the applicant meets the criteria for admission.

DEMOGRAPHIC INFORMATION

Last Name	First Name	Middle	
Address			
City	State	Zip Code	County
*Last 4 digits of social security #		College ID #	
Phone		_____@mymail.aacc.edu	

The mailing address you provide will be your address of record. It is your responsibility to notify the Health Sciences Admissions Office as well as the Records Office of name, address, and phone number changes during the application process. Applicants are advised to check their AACC email account periodically for placement updates and notices.

** If you do not have a Social Security number, you may not be permitted at some clinical rotation sites and site availability could delay or inhibit your progression in the program. An international student admission specialist in AACC's Admissions and Enrollment Development office may be able to assist students with F-1 visa status to obtain a Social Security number through practical training. Call them at 410-777-2677.*

ADMISSION/ACADEMIC REQUIREMENT CHECKLIST

Before submitting this application, you must meet all of the requirements below.

1. I have an active admission status at AACC and am in Good Standing (≥ 2.0 GPA) with the college.
2. I am ENG 101/ENG 101A (Academic Writing and Research 1) eligible.
3. I understand that all admission requirements, including testing and eligibility, must be completed by the date that the application is submitted.
4. I understand that pass/fail grades will not be accepted.
5. I have attended a mandatory (MLA, MLT, Phlebotomy) program information session for each program I am applying to. List program name(s) and date(s) below for those that apply.

Program: _____ **Date:** _____

Program: _____ **Date:** _____

Program: _____ **Date:** _____

6. If applicable, I must submit final official transcripts** from previously attended colleges from which I am transferring courses toward the program(s) I am applying to.
7. International students must submit official transcript** evaluation report from [ECE](#), [WES](#) or [SpanTran](#) to verify/authenticate high school/college transcripts.
8. If I receive conditional acceptance into the program, I understand that final acceptance in the program shall be contingent upon satisfactory completion of a health examination record and a [criminal background check](#).
9. I have reviewed the following: As part of our commitment to the health and safety of AACC employees, students, the greater community, patients and employees at our clinical site affiliates; all employees and students participating in clinicals, externships or internships in a health care or clinic setting within the [School of Health Sciences](#) or the [School of Continuing Education and Workforce Development](#) will be required to be fully vaccinated. Visit <https://www.aacc.edu/apply-and-register/credit-application/health-science-applicants/clinicals/> for detailed information.
10. I am or will be at least 18 years of age or older by the first day of class.
11. I understand that if information is missing from my student record, or application, my application will not be processed and will be considered incomplete. I will be notified by my AACC email once if required application information was not submitted.
12. I understand that my AACC email address is required for correspondence with AACC.
13. I reviewed and acknowledge the [technical standards](#).
14. I have successfully passed the Arithmetic Placement Test or MAT 005 (Arithmetic). **(For MLA only, if not general education mathematics eligible)**
15. I will submit a phlebotomy experience form, signed by my employer, if applicable. **(MLA only)**
16. I understand I must submit a copy of my high school transcripts** or GED equivalency transcript** to the AACC Records Office or have confirmed that it is on file with AACC Records office. **(For MLA only)**
17. I am MAT 137, College Algebra, eligible. **(For MLT only)**
18. I understand that, if selected or placed on a waitlist, I must attend a mandatory applicant meeting. Date and time to be announced via email. **(For MLT only)**

**Transcripts are considered official only when received by Anne Arundel Community College Records Office in the sending institution's original sealed envelope or by acceptable electronic submission.

INTERNATIONAL STUDENTS

TOEFL TEST

All international students whose native language is not English must successfully pass the TOEFL (Test of English as a Foreign Language) with a minimum score of 550 (213 is the equivalent computer score and 79 is the equivalent Internet-Based score) **OR** must have completed ENG 101/101A **and** ENG 102 course sequence with grades of C or better prior to applying to a Medical Laboratory Sciences program. AACC's code for TOEFL is 5019.

TOEFL Date taken: _____ Score: _____ Where completed: _____
OR
ENG 101/101A Semester/Year: _____ Grade: _____ Where completed: _____
and
ENG 102 Semester/Year: _____ Grade: _____ Where completed: _____

TRANSCRIPTS

I acknowledge that I have submitted an official transcript evaluation report from [ECE](#), [WES](#), or [SpanTran](#) for verification of my high school and/or college transcripts to the Records office prior to this application submission.

I used the above listed agency: _____

ADMISSION/ACADEMIC REQUIREMENTS (MLA ONLY)

(MLA only, if not already general education mathematics eligible)

I have demonstrated eligibility for general education mathematics or a score of 27 or better on the Arithmetic Placement Test or a B or better in Arithmetic (MAT 005) in order to be eligible for BIO 231 or BIO 233.

Yes, I am general education mathematics eligible

OR

Arithmetic Placement Test (APT) – This is not the same as the Accuplacer Mathematics Placement Test.

The Arithmetic Placement Test may only be taken two times. Failure to achieve a passing score (27 or better) after two attempts will require completion of MAT 005 (Arithmetic) with a grade of B or better prior to application submission. Note: The APT must be taken within 7 years from date of application submission. There is no time limit on MAT 005. Please email the Testing Office at testing-arnold@aacc.edu to schedule a testing appointment.

APT SCORE: _____ **Date taken:** _____

MAT 005 - Must provide official transcript if taken at institution other than AACC.

GRADE: _____ **Where taken:** _____

**PHLEBOTOMY EXPERIENCE
(MLA ONLY, IF APPLICABLE)**

Yes No

I have successfully completed the Phlebotomy Technician Letter of Recognition Program at Anne Arundel Community College with a GPA of 2.0 or higher. Students must complete all required courses with a grade of C or better.

Completion Date: _____

Yes No

I am currently enrolled in the Phlebotomy Technician Letter of Recognition Program at Anne Arundel Community College.

Yes No

***I have phlebotomy experience but not through Anne Arundel Community College and I have provided official transcripts from _____ to the Records Office.

***If you have phlebotomy work experience, the form to complete will be sent as an attachment in your "Application Received" email from the Admissions Office via your AACC email address.

GENERAL EDUCATION COURSES (MLT Applicants Only)
Please complete the following information (if applicable).

Must be completed with a grade of C or better.

COURSE	GRADE	CREDITS	COLLEGE WHERE COMPLETED	TERM AND YEAR COMPLETED
BIO 231 Human Biology 1				
OR				
†BIO 233 Anatomy and Physiology 1				
BIO 223 General Microbiology				
CHE 111 General Chemistry				
ENG 101/ENG 101A Academic Writing & Research 1 <small>(previously completed ENG 111, 115 or 121 will be accepted)</small>				
ENG 102 Academic Writing & Research 2 <small>(previously completed ENG 112, 116 or 121 will be accepted)</small>				
CTA 100 Computing and Information Technology <small>(formally CSI 112)</small>				
OR				
CTP 103 Theories and Applications of Digital Technology <small>(formally CTA 103)</small>				
*MAT 137 College Algebra				
SOC 111 Introduction to Sociology				
COM 111 Fund. of Oral Communication				
OR				
COM 116 Fund. of Oral Communication for Non-Native Speakers				

† This course has a prerequisite of BIO 101.

*MAT 145, 151, 191, or 230 satisfies MAT 137 requirement (former MAT courses 121, 131, 141, or 142 will also satisfy MAT 137 requirement).

BACKGROUND INFORMATION

Submit explanation of questions for which you answer "yes" and provide documents relating to your answer emailed to tdneall@aacc.edu or mailed separately to address on first page of this application, ATTN: Tammie Neall.

Do not write explanation(s) on the application

Yes <input type="radio"/>	No <input type="radio"/>	Were you ever disciplined for any academic or behavior/conduct issue by any college, university, or any other educational institution after High School including, but not limited to, probation, dismissal, suspension, disqualification, or imposition of a failing grade as a disciplinary sanction? If your answer is yes, provide a written explanation and all relevant documents relating thereto.
Yes <input type="radio"/>	No <input type="radio"/>	Have you ever been convicted of a crime, driving while intoxicated or impaired (either by alcohol or drugs), had your driving privileges suspended or revoked, and/or are there any pending charges regarding any of the above? If your answer is yes, provide a written explanation and all relevant documents relating thereto.
Yes <input type="radio"/>	No <input type="radio"/>	Have you ever surrendered your driver's license or had such license suspended or revoked? If your answer is yes, provide a written explanation and all relevant documents relating thereto.
Yes <input type="radio"/>	No <input type="radio"/>	Have you ever surrendered a professional license, certification or registration, or had one restricted, suspended or revoked? If your answer is yes, provide a written explanation and all relevant documents relating thereto.
Yes <input type="radio"/>	No <input type="radio"/>	Have you ever been placed on professional probation, had conditions or limitations placed on your ability to work even if your license had not been restricted, suspended or revoked? If your answer is yes, provide a written explanation and all relevant documents relating thereto.
Yes <input type="radio"/>	No <input type="radio"/>	Have you ever had your clinical privileges at any office or facility restricted, suspended or revoked? If your answer is yes, provide a written explanation and all relevant documents relating thereto.

NOTE: Licensing boards for certain health care occupations, including Phlebotomy, Medical Laboratory Assistant, and Medical Laboratory Technician may deny, suspend, or revoke a license or may deny the individual the opportunity to sit for an examination even if the individual has completed all program course work, if it is determined that an applicant has a criminal history or is convicted or pleads guilty or nolo contendere to a felony or other serious crime. If applicable, it is recommended to contact national certifying boards for your program of interest.

I certify that the information on this application is true and accurate to the best of my knowledge. I have read and understand the information on this application. I am aware that falsification or misrepresentation may result in being denied admission, or if enrolled, dismissed from this program. I understand that final acceptance into the Medical Laboratory Sciences Program shall be contingent upon satisfactory completion of a criminal background check and satisfactory completion of a health examination record.

Please review prior to submitting this application. This application must be completed in its entirety. I understand that by filling in my name below, it will be considered as my signature.

Signature: _____

Date: _____

PRINT NAME: _____

Notice of Nondiscrimination: AACC is an equal opportunity, affirmative action, Title IX, ADA Title 504 compliant institution. Call Disability Support Services, 410-777-1411 or Maryland Relay 711, 72 hours in advance to request most accommodations. Requests for sign language interpreters, alternative format books or assistive technology require 30 days' notice. For information on AACC's compliance and complaints concerning sexual assault, sexual misconduct, discrimination, or harassment, contact the federal compliance officer and Title IX coordinator at 410-777-1239, complianceofficer@aacc.edu or Maryland Relay 711.